

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO. | DATE   |
|---------------------------|----------|--------|--------|
| FEE DETERMINATION         | sm       | 20     | 1/3/00 |
| O.I.P.E. CLASSIFIER       |          |        |        |
| FORMALITY REVIEW          |          |        |        |
| RESPONSE FORMALITY REVIEW |          | 71471  | 2/12   |

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

| Claim    | Date     |
|----------|----------|
| Final    |          |
| Original | 12/21/94 |
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| Claim    | Date    |
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| Final    |         |
| Original | 2/21/94 |
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| Claim    | Date |
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| Final    |      |
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Form PTC  
(Rev. 6/99)

If more than 150 claims or 10 actions  
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